

# UTILITY PATENT APPLICATION TRANSMITTAL

## (Small Entity)

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Docket No.  
124169-1010 (OTA 02-036)

Total Pages in this Submission  
163

### TO THE ASSISTANT COMMISSIONER FOR PATENTS

B x Patent Application  
Washington, D.C. 20231

Transmitted herewith for filing under 35 U.S.C. 111(a) and 37 C.F.R. 1.53(b) is a new utility patent application for an invention entitled:

Anti-Infective Endotracheal Tube

and invented by:

Rabih O. Darouiche  
Randall A. Prince

03197 U.S. PTO  
10/664519  
09/17/03

If a CONTINUATION APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Which is a:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Which is a:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Enclosed are:

### Application Elements

1. ☒ Filing fee as calculated and transmitted as described below
2. ☒ Specification having 10 pages and including the following:
  - a. ☒ Descriptive Title of the Invention
  - b. ☒ Cross References to Related Applications (if applicable)
  - c. ☐ Statement Regarding Federally-sponsored Research/Development (if applicable)
  - d. ☐ Reference to Sequence Listing, a Table, or a Computer Program Listing Appendix
  - e. ☒ Background of the Invention
  - f. ☒ Brief Summary of the Invention
  - g. ☒ Brief Description of the Drawings (if filed)
  - h. ☒ Detailed Description
  - i. ☒ Claim(s) as Classified Below
  - j. ☒ Abstract of the Disclosure

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**Application Elements (Continued)**

3. ☒ Drawing(s) *(when necessary as prescribed by 35 USC 113)*
- a. ☒ Formal      Number of Sheets      3
- b. ☐ Informal      Number of Sheets      \_\_\_\_\_
4. ☐ Oath or Declaration
- a. ☐ Newly executed *(original or copy)*      ☐ Unexecuted
- b. ☐ Copy from a prior application (37 CFR 1.63(d)) *(for continuation/divisional application only)*
- c. ☐ With Power of Attorney      ☐ Without Power of Attorney
- d. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application,  
see 37 C.F.R. 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation By Reference *(usable if Box 4b is checked)*  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
6. ☐ CD ROM or CD-R in duplicate, large table or Computer Program (Appendix)
7. ☒ Application Data Sheet (See 37 CFR 1.76)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all must be included)*
- a. ☐ Computer Readable Form (CFR)
- b. ☐ Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ Paper
- c. ☐ Statement(s) Verifying Identical Paper and Computer Readable Copy

**Accompanying Application Parts**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(B) Statement (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement/PTO-1449      ☒ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☒ Certificate of Mailing
- ☐ First Class      ☒ Express Mail *(Specify Label No.):* EV 322136414 US

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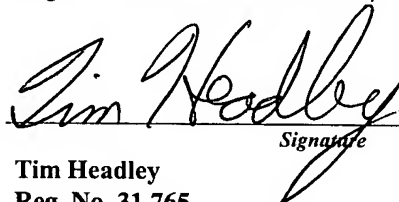
**Fee Calculation and Transmittal**

**CLAIMS AS FILED**

For	#Filed	#Allowed	#Extra	Rate	Fee
Total Claims	13	- 20 =	0	x \$9.00	\$0.00
Indep. Claims	3	- 3 =	0	x \$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>BASIC FEE</b>					\$375.00
<b>OTHER FEE (specify purpose)</b> _____					\$0.00
<b>TOTAL FILING FEE</b>					\$375.00

- ☒ A check in the amount of **\$375.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and credit Deposit Account No. **07-0153** as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of \_\_\_\_\_ as filing fee.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17.
- ☐ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b).

Dated: September 17, 2003

  
Signature

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CC: Patrick Turley  
Baylor College of Medicine